

D1  
AG

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	44-6		11/27/02
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	43		
RESPONSE FORMALITY REVIEW	15	857	12/08/02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 -+ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	11/4/02
Original	11/4/02
1	10-22-02
2	7-6-02
3	✓ 0
4	0
5	✓ 0
6	✓ ✓
7	✓ ✓
8	✓ ✓
9	✓ ✓
10	✓ 0
11	✓ 0
12	✓ 0
13	✓ 0
14	✓ 0
15	✓ 0
16	✓ 0
17	✓ 0
18	✓ 0
19	✓ 0
20	✓ 0
21	✓ =
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Claim	Date
Final	Original
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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